

P.O. BOX



Update on the Happenings of CMS's Managed Care Systems and Support Operations

Division of Program Accountability and Payment, HPBG, CBC – Centers for Medicare & Medicaid Services (formerly, HCFA)

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BENEFICIARY ELECTION PROVISION IMPLEMENTATION PLAN BENEFIT PACKAGE (PBP) AND LOCK-IN QUESTIONS AND ANSWERS

As this implementation draws near, there will be a need to quickly communicate systems information to the regional offices and to the managed care organizations (MCOs). Beginning in April, the systems web page will contain such information posed as questions and answers. The initial publication will address the testing process and the revised Plan Transfer Tracking Report. Regional offices and MCOs should check the web site <http://www.hcfa.gov/medicare/systinfo.htm> weekly for updated implementation information.

MEDICARE MANAGED CARE ENROLLMENT AND PAYMENT CONFERENCE – SAVE THIS DATE

Our annual Managed Care Enrollment and Payment Conference will be held during the week of September 11th, 2002. The general sessions will be held at the Wyndham Hotel located in Baltimore's downtown/Inner Harbor area, on September 11th and the 12th. In addition, a "basic training" session will take place at CMS headquarters in Baltimore on September 13th, 2002. We plan to have a draft agenda, conference objectives, and information on the hotel accommodations and registration on our web site no later than **June 28th**.

So check our web site:
<http://www.hcfa.gov/medicare/systinfo.htm>

ALERT ALERT ALERT

MCOs are to submit test Plan Benefit Package (PBP) transaction files between **April 29 and May 15, 2002**. After this date, we are moving code to production that will access and process these files during the monthly payment run.

Q & A: MARKET PENETRATION REPORTS ON CMS WEB PAGE

The Center for Medicare and Medicaid Services (CMS) provides quarterly data for the Health Care Community. This data facilitates plan maintenance and provides a foundation for researchers.

Two primary quarterly data updates are the State/Plan and State/County/Plan market penetration reports located at URLs

<http://www.hcfa.gov/medicare/mpsct1.htm>

and

<http://www.hcfa.gov/medicare/mpscpt1.htm> respectively.

These reports present current enrollees, eligibles and penetration by state, county and/or plan.

Because of both the importance and complexity of this data questions are frequently asked about the meaning and accuracy of data fields. Some typical questions are "Why is it that about 1% of a California plan has its enrollees on the east coast?"; "Why does the number of eligibles sometimes drop from quarter to quarter?"; "What is the precise method for

computing an enrollees age groups?".

Russell Hendel, who maintains the Market Penetration report pages has recently supplemented these pages with hyperlinked footnotes which provide answers to these and a wide variety of other questions. Users can access this information by simply clicking on the light-blue hyperlinks on these pages. They contain many useful definitions and conventions about the data that is not documented anywhere else; they also contain answers to most frequently asked questions.

And if you are curious about the answers to the 3 questions above, then please visit those pages now.

OODLES OF DISCOVERIES

Q&A'S FOR THE IMPLEMENTATION OF THE BENEFICIARY ELECTION PROVISIONS -- TESTING --

Note:

The following are a sample of the types of Questions and Answers (Q & A's) for

Beneficiary Election Provisions/Lock-in Testing:

Q #1. Will there be a "testing" procedure available to the MCO's to test the new data elements required for lock-in, PBP ID, and election types?

A #1. Yes, MCO's be able to download a "TEST" version of the Monthly Membership Report and the Transaction Reply Report. These reports will be available in TSO for downloading beginning 4/29/2002. Please note that the data contained in these test files is based on our own internal validation activities; it is not representative of any MCO's actual membership.

Revisions to these reports are as follows:

- MMR – PBP identifier added effective 6/1/2002*. (Note **NEW** record length = 200)
- TRR – PBP identifier, Election type and Prior PBP identifier (if appropriate) added effective 7/1/2002. (Note record length remains 133.)

*Note that, initially, the PBP identifier will only be included on the prospective payment records on the MMR. It will **not** be included on the adjustment records during 2002 as this information would be

misleading. PBP election history begins on 6/1/2002; no data exists prior to that date. In most cases, there will be no valid PBP identifier to populate the retroactive adjustment records. Beginning 1/1/2003, when PBP-level payments related to Hospice and the Benefit Stabilization Fund (BSF) are implemented, the PBP identifier will be populated to the appropriate adjustment records.

Follow the downloading procedures below. Please refer to the prior systems letter on testing for additional information. It is called 'Revised Monthly Membership Report for 2002 - Testing Process' dated November 20, 2001 and is available on this web site.

Downloading Process:

This process will be conducted in a test version of GROUCH. Test files in the new TRR and MMR data file formats will be created for each MCO. The procedures for downloading the test data are similar to those defined in Section 6 of the Plan Communication User's Guide.

After you connect to the CMS Data Center, press ENTER, select 1 - TSO from the CMS (HCFA) Application Menu

screen, login and proceed as follows.

- Type TSO GR200 on the command line of the ISPF menu.
- At the Report menu, select Transaction Reply/Monthly and Monthly Membership and build the transmit file for **052002**.
- Go to the TSO READY prompt by pressing F3 and entering =x on the command line of the ISPF menu.
- At the TSO READY prompt, Click on RECEIVE FILES FROM HOST.
- In the HOST FILE NAME block, type (in single quotes) **'XXXX.@BGD5050.R200.DATA'** where XXXX = your userid
- In the PC FILE NAME block, type C:\PC FILE NAME (the name the user gives the report)
- Click on OPTIONS and be sure that ASCII and CRLF are typed in the box.
- Click on OK on the FILE TRANSFER OPTIONS.
- The TRANSFER MODE box should read TEXT.

- Click on ADD TO LIST.
- Click on RECEIVE.

Q #2. CAN MCO'S ELECTRONICALLY TRANSMIT A "TEST FILE" CONTAINING THE NEW TRANSACTION TYPE CODE 71?

A #2. Yes, effective 6/1/2002, a new transaction type (71) must be used to report changes in PBP by your members. We will be modifying the Plan Transfer Tracking Report and the Exception Listing (see attached examples) to reflect this new transaction type.

MCOs are to submit test transaction files between April 29 and May 15, 2002. After this date, we are moving code to production that could access and process these files during the monthly payment run. CMS will process these files to the extent that a Plan Transfer Tracking Report is produced. It is important that you only transmit your test data during the times specified and follow the steps outlined below to prevent your test data from processing through to production. To further safeguard this test data from being processed, follow the steps below.

TEST TRANSMISSION PROCESS

- Construct your transmission file. **Note this file must only contain transaction type 71s.**
- Use **20020101** as the header date instead of the processing month.
- After transmission, type in the execute statement to prompt CMS to access your file:
EX
'OG00.@BGD5080.JCLLIB(FTSPLNP)'
- After 15-20 minutes, access your Plan Transfer Tracking Report via MCCOY option #3. Review to ensure all of your transaction types 71 were valid.*

*Note that in this case, "valid" means that the date and the transaction types are recognized as accurate by the system. No other assumptions regarding the accuracy of the data transmitted can be made.

Again, do not transmit any test data after May 15, 2002.

If you are having difficulty in producing the revised transactions, please let us know as soon as possible so that we can work with you to get your data to CMS for payment purposes. **DO NOT** wait until the cutoff day in June to request assistance as, due to high volume, we may

not be able to provide help to everyone.

More Q & A's will be available in the future for your review on our web site.

<http://www.hcfa.gov/medicare/systinfo.htm>

ALERT ALERT ALERT

CMS ACCESS USER VIOLATION NOTICES

Beginning April 15th 2002, CMS will send an email to each user that logs onto the CMS mainframe (from: RACFISSUES@CMS.HHS.GOV). This email will contain "CMS Logon Information" and "CMS Mainframe Access Violations". CMS Logon Information will include an entry for each logon session a user has with the CMS mainframe. Each entry will be date and time stamped. CMS Mainframe Access Violations will list the resources that are protected but have been accessed by other users.

These emails will arrive in MCO user inboxes the following day an MCO user has accessed the CMS mainframe and can be deleted at the user's discretion.

If there are any questions, please contact your Regional Technical Staff at CMS.

WEB SITE UPDATING/REDESIGN

Our web site is in the process of being updated and redesigned to be more user friendly and to allow for greater accessibility. The web address is still the same <http://www.hcfa.gov/medicare/systinfo.htm> The redesign will be completed and available for use by **May 31** or **sooner**.

Note: There will not be any disruption to the current site.

REMINDER—SHARING OF USER-IDS AND PASSWORDS ARE PROHIBITED

Please do not share your User-Id or password. If you do this it could result in your ID being revoked or deleted.

If you are in need of a CMS User-Id please fill-out the *Application for Access to CMS Computer Systems* dated **July 2001**. This form can be downloaded from our web site <http://www.hcfa.gov/medicare/systinfo.htm>